

**Challenge Exhibit Entry and Insurance Form**

**2010 Region Seminar  
Carolinas Region, EGA  
Ridgecrest Lifeway Conference Center, Ridgecrest, NC  
June 5-7, 2010**

**To exhibit, you must complete and sign either the appraisal or waiver section of this form for each piece you wish to exhibit and send it to the designated person by May 15, 2010.**

Complete, date, and sign the form, and send it to: Diane Stavola, 1836 Greenwood Rd., SW, Roanoke, VA 24015, 540-345-0010, dhs1836@cox.net.

Name (please print): \_\_\_\_\_ Chapter: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip Code

Telephone: \_\_\_\_\_ Email address \_\_\_\_\_

The insurance of The Embroiderers' Guild of America (EGA) contains a Fine Arts Floater that is designed to protect needlework pieces owned by or in the care, custody of EGA, its regions, or its chapters. Pieces owned by individual members are covered while on exhibit or being transported to exhibits or shows by chapter, region, or the national organization. While a piece remains in the owner's home or is being transported by its owner (shipment to exhibit), it is not covered by EGA insurance. The coverage limit \$250,000 total loss with a \$10,000 per item limit. A \$250 deductible applies to each occurrence. This means one \$250 deductible will be deducted from the total stated values of all items for which a claim has been made prior to payment for the loss. Example: Five (5) exhibitors have presented a claim for \$6,000 total. The \$250 will be prorated among the five (5) exhibitors.

In order to be covered it is necessary to fill out and sign the following, or include an appraisal by a qualified third party.

**Individual Appraisal of Fine Arts**

Name of piece: \_\_\_\_\_

Technique(s): \_\_\_\_\_

Designer: \_\_\_\_\_

Cost of materials \$ \_\_\_\_\_

Cost of finishing \$ \_\_\_\_\_

Labor \* \$ \_\_\_\_\_ = \_\_\_\_\_ x \$ \_\_\_\_\_ per hour

TOTAL \$ \_\_\_\_\_

\*Labor is computed by multiplying the total number of hours spent in completing the piece by the current minimum federal wage of your state.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Waiver**

It is mutually understood and agreed that I have knowingly and willingly chosen to exclude my exhibit piece from coverage provided by EGA for the titled exhibit.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**FORM IS NOT VALID WITHOUT SIGNATURE**